

**ROSS MILLER Secretary of State** 204 North Carson Street, Ste 1 Carson City, Nevada 89701-4299 (775) 684 5708

Website: www.nvsos.gov

## **Amendment to Statement of** Partnership Authority (PURSUANT TO NRS 87.4318)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

## **Amendment to Statement of Partnership Authority** (Pursuant to NRS 87.4318)

Name of partnership currently on file:		
2. Statement of Partnership Authority date:	and file number:	
3. Name as set forth in Statement of Partnership Author	ity, if different from current na	me:
4. The statement has been amended as follows*: (provi	de section number, if available	e)
5. Declaration and Signature:		
I declare, to the best of my knowledge under penalty of p with the provisions of NRS 360.780 and acknowledge that	t pursuant to NRS 239.330, it is	a category C felony
to knowingly offer any false or forged instrument for filin	g in the Office of the Secretary	of State.
X		
Signature of Partner (as authorized by NRS 87.4301 to 87.43	357)	Date

\* If adding new partners, provide names and mailing addresses.

Filing Fee: \$50.00

**IMPORTANT:** Failure to include any of the above information and submit with the proper fees may cause this filing to be rejected.